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## BIB DATA SHEET

CONFIRMATION NO. 2065

|   |   |  |                                    |   |                          |                                |
|---|---|--|------------------------------------|---|--------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/552,293  | <b>FILING or 371(c) DATE</b><br>09/30/2005<br><b>RULE</b>   | <b>CLASS</b><br>073                                      | <b>GROUP ART UNIT</b><br>2856      | <b>ATTORNEY DOCKET NO.</b><br>FELDMANN ET AL 1<br>PCT   |                          |                                |
| <b>APPLICANTS</b><br>Dagmar Feldmann, Schwabenheim, GERMANY;<br>Dieter Thelen, Modautal, GERMANY;<br>Hans-Peter Korber, Darmstadt, GERMANY;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/DE04/00697 04/03/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 103 16 767.6 04/10/2003<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>08/18/2006 |   |  |                                    |   |                          |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/SAMIR M SHAH/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWINGS</b><br>2   | <b>TOTAL CLAIMS</b><br>8 | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>WILLIAM COLLARD<br>COLLARD & ROE, P.C.<br>1077 NORTHERN BOULEVARD<br>ROSLYN, NY 11576<br>UNITED STATES  |   |  |                                    |   |                          |                                |
| <b>TITLE</b><br>Unbalance measuring device and method for unbalance measurement   |   |  |                                    |   |                          |                                |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                          |                                |